

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814
(916) 445-7046



September 29, 1982

ALL-COUNTY LETTER NO. 82-98

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY AUDITORS
ALL COUNTY FISCAL OFFICERS
ALL COUNTY ADMINISTRATIVE SERVICES OFFICERS

SUBJECT: ASSISTANCE CLAIMING INSTRUCTIONS FOR THE ADOPTION ASSISTANCE (AAP)
INCLUDING AID FOR ADOPTION OF CHILDREN PROGRAM (AAC)

REFERENCE: ALL COUNTY INFORMATION NOTICE I-431-82 DATED SEPTEMBER 17, 1982

Chapter 977, Statutes of 1982 (AB 2695) implements the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) which established a new Title IV-E for federal funding of the AFDC-FC Program and the newly created Adoption Assistance Program (AAP). The purpose of this letter is to provide assistance claiming instructions for the new AAP and for those cases currently aided on the AAC program.

Effective October 1, 1982, adoption assistance payments to specified intake adoption assistance cases will be eligible for 50 percent federal financial participation while others (including the current AAC cases) will be eligible only for state financial participation. Therefore, for claiming purposes, there will be separate claiming for the two types of cases, i.e., two Summary Reports, two payrolls, two aid codes, etc. Instructions relevant to these new forms are listed below:

Adoption Assistance Program, Nonfederal
Includes Aid for the Adoption of Children

All nonfederal adoption cases (those designated as existing AAC cases through September 30, 1982, and those eligible as AAP cases effective October 1, 1982) will be identified with the aid code "04". The new "04" AAP - NF cases will be further identified with an alpha identification code. This recommended coding is "N".

Adoption Assistance Program/Federal

Cases which become eligible for the Adoption Assistance Program on or after October 1, 1982, and meet the federal eligibility standards will be identified with the aid code "03". Public Law 96-272 limits federal financial participation (FFP) to that which would be paid if the child were in a foster family home. Provision has been made on the Summary Report to provide for accurate

claiming of federal participation in those instances where eligibility has been determined for an assistance payment in an amount greater than the foster family home rate. Those cases for which an assistance payment is made in an amount greater than the foster family home rate shall be identified with an alpha identification code. The recommended coding is "A".

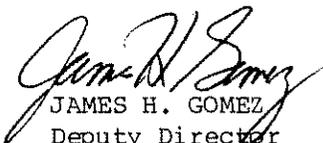
General

The previous modification on the AAC claim (Aid for the Adoption of Children - Form No. AB 800 A) on Lines 13 through 16 which computed the average foster care and AAC payments in order to control excess payments has been deleted. However, Chapter 977, Statutes of 1982 (AB 2695) limits adoption assistance payments to the amount the child would have received in foster care. Should the county choose to issue a payment for an individual child that exceeds the allowable AAP payment, such excess costs are not eligible as AAP payments and shall not be included on this claim.

If the current county system cannot accommodate the recommended codes, written notification of the codes utilized must be submitted with the October 1982 claims.

For your convenience and preplanning, samples of the two Summary Reports are attached. An initial supply of the two forms will be sent to you under separate cover. The information on the Summary Report must be substantiated with a payroll in accordance with Fiscal Manual Handbook Chapter 25-750.

Any questions regarding assistance claiming for AAP should be referred to the Fiscal Assistance Policy Unit at (916) 445-7046 or ATSS (8) 485-7046.


JAMES H. GOMEZ
Deputy Director
Administration

cc: CWDA

Attachments

INSTRUCTIONS FOR USE OF FORM AD 800B

1. Enter county name, month and year of claim in space provided.
2. Complete Lines 1 through 5 and 7 through 9 in accordance with amounts shown on the integrated payroll summary. (For nonintegrated payrolls, enter grand totals shown for each payroll or contra roll.) Line 4 has been omitted from the form because there are no provisions to reduce grants to zero due to prior overpayments.
3. Enter the subtotals in Lines 6 and 10, and totals in Lines 12A and B.
4. Line 13B - Enter line 12B.
5. Line 13C - Enter line 12B.
6. Lines 14 and 15 - Reserved for the application of adjustments made by the state (State Field Audit Exceptions, etc.).
7. Lines 16 and 17 - Included at county request and use is optional. If adjustments are reported in Line 9 which affect total aid paid, this space may be used for reconciling total expenditures as reported by the welfare department with the county auditor's records of expenditures.

SUMMARY REPORT OF ASSISTANCE EXPENDITURES - ADOPTION ASSISTANCE PROGRAM/FEDERAL

For State Use DSS County Welfare County Auditor

COUNTY _____

DATE (MONTH, YEAR) _____

A PERSONS COUNT	B AMOUNTS	SOURCE DOCUMENTS
		1. Main Payroll
		2. Current Month Supplemental Payroll
()	()	3. Current Month Cancellation Contra Roll
		5. Prior Months Supplemental Payroll
		6. Subtotal (reconciliation totals)
()	()	7. Prior Months Cancellation Contra Roll
()	()	8. Abatements and Repayments
		9. Schedule of Adjustments (show minus items in parentheses)
		10. Subtotals (Lines 7, 8, 9)
		11. DSS Office Audit Corrections (for state use only)
		12. TOTAL

13. Net payments not subject to .5 Federal funding

14. The amount in Line 13A subject to Federal funding

C
[]

15. Line 12B minus Line 13A plus Line 14A x .5

D
[]

16. Line 12B minus Line 15C

	B	C FEDERAL Enter Line 15 C	D STATE Enter Line 16D	
GRAND TOTALS	\$ []	\$ []	\$ []	17.
(FOR STATE USE)		(Line 15C)	(Line 16D)	18.
(FOR COUNTY USE)				19.
A CH				20.
				21.

I HEREBY CERTIFY, under penalty of perjury, that I am the official responsible for the administration of the Adoption Assistance Program in and for aforesaid county; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the aid payments, allotments for payments in kind, aid repayments and adjustments reflected herein have been made in accordance with all provisions of the Welfare and Institutions Code and the rules and regulations of the Department of Social Services.

I HEREBY CERTIFY, under penalty of perjury, that I am the officer in aforesaid county responsible for the examination and settlement of accounts; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the amounts claimed herein are in accordance with authorizations for the Adoption Assistance Program made by the county; that said amounts correctly reflect Federal and State Shares in the aid payments claimed and that warrants therefore have been issued, or funds made available for the payments in kind listed herein according to law and the rules and regulations of the Department of Social Services.

SIGNATURE OF COUNTY WELFARE DIRECTOR _____
DATE _____

SIGNATURE OF COUNTY AUDITOR OR CONTROLLER _____
DATE _____

INSTRUCTIONS FOR USE OF FORM AD 800A

1. Enter county name, month and year of claim in space provided.
2. Complete Lines 1 through 5 and 7 through 9 in accordance with amounts shown on the integrated payroll or contra foll.) Line 4 has been omitted from the form because there are no provisions to reduce grants to zero due to prior overpayments.
3. Enter the subtotals in Lines 6 and 10, and totals in Lines 12A and B.
4. Line 13A - For children receiving AAP payments in excess of the foster family home rate enter the total assistance payments (minus any cancellations, abatements, etc.).
5. Line 14A - Enter that amount in line 13A subject to 50 percent federal funding.
6. Line 15C - Subtract line 13A from line 12B, then add line 14A and multiply by .5 to determine 50 percent federal share.
7. Line 16D - Subtract line 15C from line 12B to determine the state share.
8. Line 17C - Enter line 15C.
9. Line 17D - Enter line 16D.
10. Lines 18 and 19 - Reserved for the application of adjustments made by the state (Federal and/or State Field Audit Exceptions, etc.).
11. Lines 20 and 21 - Included at county request and use is optional. If adjustments are reported in line 9 which affect total aid paid, this space may be used for reconciling total expenditures as reported by the welfare department with the county auditor's records of expenditures.